

# Minimally invasive hysterectomy:

## Preparing for your surgery and recovery at home



### Information for patients and families about minimally invasive hysterectomy

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## Learning about your surgery

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### What is a minimally invasive hysterectomy?

A hysterectomy is surgery to remove your uterus. This surgery is recommended to treat or control cancer.

In the past, a hysterectomy always required a large incision in the lower abdomen. Newer methods of surgery are ‘minimally invasive’, which means the surgery is performed through small incisions.

A **laparoscopic hysterectomy** is one type of minimally invasive hysterectomy.

- A small incision (about ½ inch) is made near your belly button.
- Carbon dioxide gas is put into your abdomen to expand the area.
- A thin, lighted tube with a camera (called a laparoscope) is inserted through the incision.
- The camera sends a video to a monitor, letting the surgical team see inside your body.
- Other small incisions are made in your abdomen for the surgical tools that are used to remove your uterus.

#### Benefits of minimally invasive hysterectomy:

- ✓ Less pain and scarring
- ✓ Less time in hospital
- ✓ Faster recovery
- ✓ Less chance of bleeding and infection

Surgeons with special training can do a **robotic-assisted laparoscopic hysterectomy**. The approach is similar to a laparoscopic hysterectomy as described above, but the surgeon uses a computer to control the precise movements of the surgical tools, guided by a 3-dimensional view of your uterus.

Your surgeon will describe the method of surgery that is recommended for you, and answer your questions.

## How to prepare for your surgery

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### When is my Pre-Admission Clinic visit?

You will have an appointment in the Pre-Admission Clinic 1 or 3 weeks before your surgery.

#### **Pre-Admission Clinic**

Ground Floor, Eaton Wing  
Toronto General Hospital  
200 Elizabeth Street  
Phone: 416 340 3331

**This visit is very important to assess your health and help you prepare for your surgery and recovery.** If you do not come to this visit, we may have to cancel your surgery. Plan for your visit to take at least 4 hours. We encourage you to bring someone with you to this appointment.

### What should I bring to my Pre-Admission Clinic visit?

Please bring:

- Your Ontario Health Card (OHIP card)
- Information about any other medical insurance you have, including policy numbers
- All medications you are taking in their original pharmacy containers. Bring your prescription medications and the medication, supplements, herbs and natural products that you buy without a prescription.
- A list of your questions about the surgery and recovery

### What happens at my Pre-Admission Clinic visit?

During this visit, you will have tests:

- You will have blood tests and routine skin swabs. Swabs are taken from your nose and other areas of your body to check for germs that could cause infections.
- You may also need an electrocardiogram (ECG) to check your heart and a chest x-ray to check your lungs.

**You will meet many health care providers during your Pre-Admission Clinic visit. Please feel free to ask them any questions you may have.**

You will meet with the **preadmission nurse**, who will:

- Review your health history
- Teach you how to prepare your skin for surgery. Shower every day for 5 days before your surgery. **Most importantly, shower:**
  - ✓ The evening before your surgery
  - ✓ The day of your surgery
- Teach you the breathing and leg exercises you need to do after surgery

You will meet with the **Clinical Nurse Specialist (CNS)**, a specialist in the care of women with cancer of the reproductive system. The CNS will:

- Review the plans for your surgery
- Teach you how to care for yourself after surgery
- Review the plans for your follow-up care

You will meet with a **Pharmacist** to review your medications. The Pharmacist will tell you which medications to stop before surgery, and which to take on the morning of your surgery with a sip of water.

Depending on your needs, you may also meet:

- An Anesthetist who will discuss your anesthetic (the medication that will make you sleep during surgery) and pain relief after surgery.
- A member of the Medicine team, if you have other health problems.
- A member of the Thrombosis team, if you take blood thinners or have had a blood clot.

### **How can I prepare for surgery at home?**

- Arrange for someone to take you home from the hospital after surgery. If you do not have someone to take you home, your surgery may have to be cancelled.
- Arrange for help at home during the first few weeks of your recovery. You may need help with groceries, cooking, laundry, cleaning and rides to medical appointments.
- If you smoke, try to stop. You will have fewer heart and breathing problems, fewer infections, and heal faster after surgery.

## What should I do the day before surgery?

Please remove all nail polish and body piercings.

You may need to start a liquid diet or clean out your bowels (a bowel prep).

Your surgeon will order one of the following:

### **No bowel preparation**

- Eat or drink as usual until midnight.
- Do not have anything to eat or drink after midnight.

### **No bowel preparation, clear fluid diet**

- Starting at breakfast, have clear fluids only until midnight.  
Clear fluids include water, apple juice, broth, soda and jello.  
Do not have any solid foods, milk or milk products.
- Do not have anything to eat or drink after midnight.

### **Bowel preparation and clear fluid diet**

- Buy your bowel prep at the pharmacy before surgery.  
Keep it in the fridge.
- Follow the bowel prep instructions given to you at the surgeon's office.
- Starting at breakfast, have clear fluids only until midnight.  
Clear fluids include water, apple juice, broth, soda and jello.  
Do not have any solid foods, milk or milk products.
- Start to drink the bowel prep at noon. It will start to work in 1 to 4 hours. Plan to be near the toilet during this time. You will have frequent, watery bowel movements.
- It is important to continue drinking clear fluids to replace the fluids lost with frequent bowel movements.
- Do not have anything to eat or drink after midnight.
- Before your surgery, **you must shower or bathe at home** to clean your skin and reduce your chance of infection after your surgery.

## What to expect on the day of surgery

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If the Pharmacist told you to take a medication on the morning of surgery, take it at home with a sip of water.

Bring these things to the hospital:

- Your Ontario Health Card (OHIP card)
- Information about any other medical insurance you have, including policy numbers
- All medications you are taking, in their original bottles. This includes prescription medications, and the medication, supplements, herbs and natural products that you buy without a prescription.
- Comfortable clothes and shoes to wear home

**You are responsible for your belongings.**

**Please leave jewellery and valuables at home.**

### When do I come to the hospital?

**Come to the Surgical Admission Unit 2 hours before your surgery is scheduled.**

#### **Surgical Admission Clinic**

2nd Floor  
Peter Munk Building  
Toronto General Hospital  
Phone: 416 340 3851

When you arrive at the Surgical Admission Unit:

- The nurses will help you get ready for surgery. They will check your blood pressure, pulse, temperature and breathing.
- You will change into a hospital gown
- The nurses will put an intravenous (IV) in a vein in your arm. The IV will be used to give you fluids and medications during and after surgery.
- When everything is ready, you will go to the operating room.

**Please note!**

**For your safety, we will check your hospital identification band and ask the same questions many times, such as your name, date of birth, and the type of surgery you are having.**

## What happens after surgery?

You will go to the **Post Anesthetic Care Unit (PACU)**. This is the recovery room where the nurses will care for you until you wake up. In the PACU:

- Nurses will check your **vital signs** often. This includes your heart rate, breathing and blood pressure.
- You will be given fluids through your **intravenous**.
- You will be given **oxygen** to help you breathe comfortably.
- A soft, thin tube called a **catheter** will be in your bladder to drain urine. While the catheter is in place, you may feel like you have to pass urine. The catheter will likely be removed before you leave the PACU unless your doctor recommends to keep it in longer.
- Deep breathing and coughing exercises will help keep your lungs clear. Moving your toes, feet and legs will help blood flow in your legs.

When you are ready, you will go to **Nursing Unit 6A – Consolidated Short Stay Unit (CSSU)**. In the CSSU, the nurses will:

- Check your vital signs, incisions and vaginal bleeding.
- Give you medication to relieve your pain.
- Remove your IV when you are drinking well.
- Help you to sit up and get out of bed.
- Take you to the bathroom the first time and measure your urine.

## How can I take care of myself after surgery?

- Continue your deep breathing, coughing and leg exercises.
- Tell the nurse when you have pain. Do not wait until your pain gets very bad to ask for pain medication.
- Walk around the unit. Moving early and often helps you to recover.
- It is important to empty your bladder well. If you have difficulty passing urine, tell your nurse. If you cannot pass urine after a few tries, your nurse may put a catheter back into your bladder. You may go home with the catheter in place.

## When will I go home?

If you are recovering well, you will go home the same day as your surgery. Make sure you have arranged for someone to take you home. Someone **must** stay at home with you the first night of surgery

Before you leave the hospital, the nurses will:

- Review with you and your family all instructions for your care.  
This includes:
  - ✓ what to eat and drink
  - ✓ physical activity and exercise
  - ✓ personal care
  - ✓ how to manage your pain
  - ✓ how to resume your usual activities
  - ✓ what warning signs to watch for
  - ✓ when to get medical help
- Review your **medications**. You will get a prescription for any medications that are new or have been changed. You may fill your prescriptions at the hospital pharmacy before leaving the hospital.
- Tell you when your **follow-up appointment** is scheduled in the Gynecology Clinic at Princess Margaret Hospital, or who to call to make this appointment.
- Give you a **discharge summary**. This contains important information including the details of your surgery, written instructions for your care, and follow-up.
- Answer any questions you have before going home.

## How to care for yourself at home

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Plan to have someone stay with you for the first 24 hours after surgery.

Within 24 hours of your surgery, the CNS or another member of the health care team will call to check on you and answer any questions you may have.

You will continue to recover at home over the next few weeks.

### How do I manage pain?

- Take your pain medication as prescribed by your surgeon.  
There are 3 options:

<input type="checkbox"/> <b>Naproxen</b>	<ul style="list-style-type: none"><li>• Your surgeon may prescribe Naproxen to relieve pain and inflammation.</li><li>• Take Naproxen exactly as prescribed. The usual dose is 500 mg of naproxen two times a day (morning and evening), taken with food.</li></ul>
<input type="checkbox"/> <b>Acetaminophen</b> (such as Extra Strength Tylenol®)	<ul style="list-style-type: none"><li>• Take 500 to 1000 mg acetaminophen (1 or 2 tablets) every 6 hours, as needed. Do not take more than 4000 mg of acetaminophen in one day.</li><li>• Start by taking the medication regularly, then decrease as you feel less pain.</li></ul>
<input type="checkbox"/> <b>Narcotic</b> (such as Oxycodone, Dilaudid or Morphine)	<ul style="list-style-type: none"><li>• Your surgeon may prescribe a narcotic, which is a strong pain medication.</li><li>• Take this exactly as prescribed.</li></ul>

- It is important to control your pain. You need to be comfortable enough to move and walk. This helps you recover faster. If the medication does not relieve your pain, call the CNS.
- As you heal, you will feel less pain and will not need pain medication as often.
- You may have some pain in your shoulder, due to the gas that was put into your abdomen during surgery. Walking and moving around can help.

## What can I eat and drink?

- Drink lots of fluids. Drink 6 to 8 glasses of fluid a day, unless you are given other instructions.
- Slowly return to your usual diet over a few days. You may find it easier to start with small meals.
- Healthy eating can give you energy and strength, and help you recover.
- Eat a variety of foods from the four food groups. Choose foods that are low in fat, cholesterol and salt.
- For more information see Canada's Food Guide. Go to Health Canada's website: [www.hc-sc.gc.ca](http://www.hc-sc.gc.ca) and click on 'Food and Nutrition', then 'Canada's Food Guide'.

## How can I prevent constipation?

Constipation is common after surgery. To keep bowel movements soft and regular:

- Drink lots of fluids.
- Eat foods high in fiber such as fruits, vegetables, lentils, beans and whole grain breads and cereals.
- Take a laxative or stool softener for 4 to 6 weeks to prevent straining when you have a bowel movement. You can buy these at the pharmacy.

<input type="checkbox"/> Laxative (senna, Senekot®)	<ul style="list-style-type: none"><li>• Take 1 or 2 tablets at bedtime.</li></ul>
<input type="checkbox"/> Stool softener (docusate sodium, Colace®)	<ul style="list-style-type: none"><li>• Take 1 tablet in the morning and 1 tablet at bedtime.</li></ul>

## When can I shower or take a bath?

- You can have a shower the day after surgery.
- Have a bath when your incisions have completely healed.

## How do I care for my incisions?

- Incisions are usually closed with stitches and Steri-strips™. The Steri-strips will come off on their own in about 7 days. You can take them off if they begin to come away or haven't fallen off after 7 days. The stitches under the skin will dissolve in 3 to 4 weeks and do not need to be removed.
- Sometimes, incisions are closed with staples. If you have staples, they will need to be removed in 7 to 10 days at your family doctor's office.
- Check your incisions each day. Look for any signs of infection: redness, swelling, pain or discharge.
- Keep your incisions clean and dry. Gently wash them with mild soap and water. Rinse well and pat dry with a clean towel. Do not put creams, lotions or powder on your incisions.

## What activities can I do?

- You can go back to your usual activities when you feel ready. Start with light activities the first week after surgery, such as short walks.
- You may get tired easily. Listen to your body and don't do more than you can handle.
- If an activity causes discomfort or pain, stop and rest before trying that activity again.
- When taking long car rides, stop every 2 hours to walk around. Sitting for a long time increases the chances of developing a blood clot.

### **Regular physical activity helps:**

- ✓ Speed your recovery from surgery
- ✓ Keep your blood flowing, which can prevent blood clots from forming
- ✓ Prevent constipation
- ✓ Keep your heart healthy
- ✓ Build strong muscles

**For 3 to 4 weeks after surgery, do not do activities that strain your stomach muscles such as:**



- Heavy lifting (lifting anything over 10 lbs or 5 kg)
- Vacuuming or pushing a lawn mower
- Weight training
- High impact sports

### **When can I drive?**

- You can drive a vehicle when you have no pain and/or you are no longer taking strong pain medication (narcotics).
- Call your auto insurance company to see if there are any other driving restrictions after surgery.

### **When can I have sex?**

- Do not have sexual intercourse or place anything in your vagina for 6 to 8 weeks after surgery. During this time, you can be intimate in other ways such as cuddling and touching.
- If the top part of your vagina was removed, your vagina will be shorter. As the vagina is stretchy, you may not notice a difference during sexual intercourse.
- The surgery should not affect your desire for sex or ability to have an orgasm. However, your orgasms may feel slightly different.

### **How long can I expect to have bleeding?**

- Some light vaginal bleeding and spotting is normal for up to 5 weeks after surgery. When you have bleeding use pads, not tampons.

## When can I go back to work?

- Your surgeon will let you know when it is safe for you to return to work. This will depend on your recovery and the type of work you do.

## How will surgery affect my emotions?

It takes time for your mind and body to recover after surgery. It is normal to feel low at times during your recovery. Some women also feel a sense of loss after a hysterectomy.

You may find it helpful to discuss your feelings with people who are close to you. If your feelings seem overwhelming, see your family doctor for help.

## When do I need follow-up appointments?

- If you went home with a catheter in place, you will have a follow-up appointment in 1 or 2 days to have the catheter removed. This appointment will be in the Gynecology Clinic on the main floor at Princess Margaret Hospital.
- If your incisions were closed with staples, make an appointment with your family doctor to have them removed 7 to 10 days after surgery.
- **You will have a follow-up appointment 3 to 4 weeks after your surgery to check how well you are healing.** This appointment will be in the Gynecology Clinic on the main floor at Princess Margaret Hospital.

At this visit, your surgeon will discuss the pathology report from your surgery. This report describes the cells and tissues that were taken during your surgery and examined under a microscope. It takes about 3 to 4 weeks for this report to be ready.

## Who to call if you have questions

### If you have questions, concerns or need support, you may call:

Clinical Nurse Specialist (CNS) for Gynecology Oncology 416 340 4800, ext. 3674

Gynecology Oncology Resource Nurse 416 946 4501, ext. 3280

### If you are calling after business hours or on a weekend or holiday:

Call the Nursing Unit on 6A – Consolidated Short Stay Unit (CSSU) at 416 340 3521 or 416 340 3880

## When to get medical help

### If you have questions, concerns or need support, you may call:



- Bright red bleeding from your vagina (soaking a pad every 2 hours)
- Pain that is not relieved by pain medication or is getting worse
- Persistent nausea and vomiting
- Discharge from your vagina or incisions that smells bad
- A temperature higher than 38 °C (100°F) and/or you feel chills
- Redness or increased pain around your incision
- Constipation (difficulty having bowel movements)

### If you have questions, concerns or need support, you may call:



- Bright red bleeding (soaking a pad every hour) or you are passing large clots from your vagina
- Severe pain that does not get better with pain medication or pain that is getting worse
- Severe nausea and vomiting
- Pain, redness or swelling in your calf or your leg
- Sudden shortness of breath